

BEST AVAILABLE COPY

Index of Claims			Application No.	Applicant(s)	
			10/667,195	KUSTERMANN ET AL	
			Examiner	Art Unit	
			Brenda A Lamb	1734	
<input checked="" type="checkbox"/> Rejected <input type="checkbox"/> = Allowed		<input type="checkbox"/> - (Through numeral) <input type="checkbox"/> + Restricted	<input type="checkbox"/> N Non-Elected <input type="checkbox"/> I Interference	<input type="checkbox"/> A Appeal <input type="checkbox"/> O Objected	
Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
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2	1/20/2000	52		102	
3	1/20/2000	53		103	
4	1/20/2000	54		104	
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49		99		149	
50		100		150	